

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1445 Ross Avenue
Suite 1400
Dallas TX 75202-2703
☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00119354

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
☐ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☐ January 31 Year-End Report (YE)
☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
☐ Termination Report (TER)

- (b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☒ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

- (c) 12-Day ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
PRE-Election Report for the: ☐ Convention (12C) ☐ Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

- (d) 30-Day ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)
POST-Election Report for the:

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 11 01 2015 through M M M / D D D / Y Y Y Y Y Y 11 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Todd Plott

Signature of Treasurer Mr. Todd Plott [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 12 18 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		81358.03
(b) Cash on Hand at Beginning of Reporting Period.....	91050.74	
(c) Total Receipts (from Line 19)	12266.29	158273.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	103317.03	239631.13
7. Total Disbursements (from Line 31)	7000.00	143314.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	96317.03	96317.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2015			

To:

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

11172.35

108303.07

(ii) Unitemized

1093.94

49970.03

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

12266.29

158273.10

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

12266.29

158273.10

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

12266.29

158273.10

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

12266.29

158273.10

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	2505.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2505.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	103500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1660.45
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1660.45
29. Other Disbursements	7000.00	35648.20
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7000.00	143314.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7000.00	143314.10

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12266.29	158273.10
34. Total Contribution Refunds (from Line 28(d))	0.00	1660.45
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12266.29	156612.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	2505.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	2505.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JANE E HAMILTON

Mailing Address 8050 Royal Saint Georges Ln

City State Zip Code
Duluth GA 30097-1647

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATLANTA MEDICAL CENTER

Occupation

DIR, SURGICAL SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 21 / 2015

Transaction ID : A81C205A8012845879A6

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. SHEENA D. JOHNSON

Mailing Address 4573 Pennhurst St

City State Zip Code
Philadelphia PA 19124-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer

HAHNEMANN UNIVERSITY HOSPITAL

Occupation

Radiology Diagnostic Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 21 / 2015

Transaction ID : A3E3D1CA92A5B4E9BBF1

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. RYAN D. LEE

Mailing Address 24 Bridle Path Ln

City State Zip Code
Bluffton SC 29910-7600

FEC ID number of contributing
federal political committee.

C

Name of Employer

COASTAL CAROLINA MEDICAL CENTER

Occupation

Director, Physicians Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 21 / 2015

Transaction ID : A8A951A10EDB44EFE9FE

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. RAYMOND J FOSTER

Mailing Address 68220 Concepcion Rd

City	State	Zip Code
Cathedral City	CA	92234-3657

FEC ID number of contributing
federal political committee.

C

Name of Employer

DESERT REGIONAL MEDICAL CENTER

Occupation

DIR-IMAGING SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2015			

Transaction ID : A74478B1B7E904CB7A0C

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JORGE DIAZMailing Address 1350 SW 122nd Ave
Apt 221

City	State	Zip Code
Miami	FL	33184-2864

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORAL GABLES HOSPITAL

Occupation

DIR, CARDIOPULMONARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2015			

Transaction ID : A212E287F7F92425383E

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. ALFRED SCHULS

Mailing Address 5017 Prosperity Ridge Rd

City	State	Zip Code
Charlotte	NC	28269-1538

FEC ID number of contributing
federal political committee.

C

Name of Employer

PIEDMONT MEDICAL CENTER

Occupation

DIR, CARDIOVASCULAR SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2015			

Transaction ID : A95744C425D6141F29DF

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 8 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. THOMAS I RUNKLE

Mailing Address 868B N Pennock St

City
Philadelphia

State Zip Code
PA 19130-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

HAHNEMANN UNIVERSITY HOSPITAL

Occupation

DIRECTOR OF OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 21 / 2015

Transaction ID : A808CDC2AA5F24589BE9

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JAIKUMAR KRISHNASWAMY

Mailing Address 13123 Avalange Ct

City
Cypress

State Zip Code
TX 77429-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer

CYPRESS FAIRBANKS MEDICAL CENTER

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A690A87EB780B4507B75

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. EDWARD MESCO

Mailing Address 7365 NW 54th St

City
Lauderhill

State Zip Code
FL 33319-6346

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, REG REIMBURSEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AF95584036271401BA73

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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PAGE 9 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHAD W LAND

Mailing Address 215 Durango Dr

City

State

Zip Code

Trophy Club

TX

76262-5294

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

TENET HEALTHCARE CORPORATION

MGR, AUDIT SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A8EC964F341D24C84867

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. LINDA M. BENDER

Mailing Address 1445 Ross Avenue
Suite 1400

City

State

Zip Code

Dallas

TX

75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

JFK Memorial Hospital

Director, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A8CE4322BF8EE4E50ADC

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MARIO ESTRELL

Mailing Address 2714 Chaparral Dr

City

State

Zip Code

Nacogdoches

TX

75965-3722

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Tenet W2p

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AFE80E7F98EAA4D54923

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

PAGE 10 OF 77

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MARK L ATTEBERRY

Mailing Address RR 4 Box 76F

City

Shelbyville

State

IL

Zip Code

62565-8664

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, PROJECT C&D II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AD0E18199C7864844A75

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. LEONARD DEONARINE

Mailing Address 1129 Wishing Well Ct

City

Cedar Hill

State

TX

Zip Code

75104-8255

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, BUSINESS CONTINUITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AB36CDF22F2204D9FA75

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. KIM C PULLIAM

Mailing Address 3016 Duplex Rd

City

Spring Hill

State

TN

Zip Code

37174-9216

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, C&D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AEA068F971404B8CB4A

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANTHONY BAIRD

Mailing Address 4940 Pikes Peak Dr

City

El Paso

State

TX

Zip Code

79904-2023

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROVIDENCE MEMORIAL HOSPITAL

Occupation

ADMIN DIR DCQI

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A359C9D724EEA46C29A9

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. NANCY FOSTER

Mailing Address 9603 Forest Ridge Cir

City

Davie

State

FL

Zip Code

33328-6791

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, REG REIMBURSEMENT

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A54F707EE310546680F

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. BENSON P CHACKO

Mailing Address PO Box 963040

City

El Paso

State

TX

Zip Code

79996-3040

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE HOSPITAL

Occupation

DBD-ASSOC ADMINISTRATOR

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A3F2DCDC7A03D4CBAB13

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOSEFA M KOLODZIECZYK

Mailing Address 424 Westwood Rd

City

West Palm Beach

State

FL

Zip Code

33401-7934

FEC ID number of contributing
federal political committee.

C

Name of Employer

PALM BEACH GARDENS MEDICAL CENTER

Occupation

CONTROLLER 2

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A041508FB95A6471FBFE

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JOHN RODRIGUES

Mailing Address 805 Bonnie Ct.

City

Allen

State

TX

Zip Code

75002-3622

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Director of Client Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A999FE6BE753C4F3CAE9

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. KEITH PITTS

Mailing Address 4441 South Versailles Ave

City

Dallas

State

TX

Zip Code

75205-3012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tenet Healthcare Corporation

Occupation

Vice Chairman

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AFAC47AEF1CF14A59812

Amount of Each Receipt this Period

384.00

Payroll Deduction: \$192.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

442.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CURTIS M. PERRYMAN

Mailing Address 1445 Ross Avenue
Suite 1400

City State Zip Code
Dallas TX 75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Director, C&D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A41423E61780141CE841

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ANIL JAIN

Mailing Address 62 Governors Way

City State Zip Code
Brentwood TN 37027-8927

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Interim CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A1267D263FBF748FE983

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. INEZ VARGAS

Mailing Address 1219 Cherry Spring Dr

City State Zip Code
Houston TX 77038-2117

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET PATIENT FINCL SVCS

Occupation

DIR, REV CYCLE MGMT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A4CCFB3BD3E824522A95

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FELITA A CARTER

Mailing Address 290 E Plantation Dr

City

Sharpsburg

State

GA

Zip Code

30277-1958

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, MGD CARE ECONOMICS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A63E0C88837CD4D1D8F4

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. SHERRI MOORE

Mailing Address 10989 County Road 59

City

Celina

State

TX

Zip Code

75009-2280

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, HUMAN RESOURCES

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A5BA1DA0158AF491A930

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. LUANNE M. EWALD

Mailing Address 232 MIDLAND BLVD

City

Royal Oak

State

MI

Zip Code

48073-2670

FEC ID number of contributing
federal political committee.

C

Name of Employer

Detroit Medical Center

Occupation

Director of Business Development

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

923.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A556F13B86C5F4941AF6

Amount of Each Receipt this Period

76.94

Payroll Deduction: \$38.47/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

116.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. THOMAS WOLF

Mailing Address 2613 Millington Dr

City

Plano

State

TX

Zip Code

75093-3560

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, REIMBURSEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : AF9B85AD09D8D4043B82

Amount of Each Receipt this Period

32.00

Payroll Deduction: \$16.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. DOUGLAS BREWER

Mailing Address 351 SAWMILL ROAD

City

Dillsburg

State

PA

Zip Code

17019-9582

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATLANTA MEDICAL CENTER

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : A2BAAD0D81CC3466BA12

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. DAVID M. KATZ

Mailing Address 363 St. Clair

City

Grosse Pointe

State

MI

Zip Code

48230-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Detroit Medical Center

Occupation

Senior VP, Community Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : AACC5A561925B4245B22

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$19.23/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

148.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROBERT D COKER

Mailing Address 7505 Dana Ln

City

North Richland Hills

State

TX

Zip Code

76182-4551

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, QUALITY MGT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A0F3F1548776F49CAB92

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. MICHAEL A KENDRICK

Mailing Address 1535 Lovell Lndg

City

Columbia

State

IL

Zip Code

62236-2857

FEC ID number of contributing
federal political committee.

C

Name of Employer

DES PERES HOSPITAL

Occupation

COO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A3C62ABF1358B49AD870

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. PAUL D. SLAVIN

Mailing Address 508 Forrest Ave

City

Cleburne

State

TX

Zip Code

76033-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP COMPENSATION BENEFITS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : AA3DDCFFBD7CD46239D6

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

78.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELIZABETH JOHNSON

Mailing Address 3302 Marsh Ln

City

Grapevine

State

TX

Zip Code

76051-6828

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, APPLIED CLINICAL INF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : A6C841068F1C84405B73

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. MONICA C VARGAS

Mailing Address 4017 Flamingo Dr

City

El Paso

State

TX

Zip Code

79902-1313

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE
HOSPITAL

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : AFA721CB771494EEA8A8

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. HANK D IRICK JR.

Mailing Address 3305 Elam Ct

City

Plano

State

TX

Zip Code

75093-8087

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, COST REPORTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : A4008DBFF2C3C41B281B

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

134.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AUDREY T ANDREWS

Mailing Address 702 Penfolds Ln

City	State	Zip Code
Coppell	TX	75019-4544

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A0908A991361D4181AC2

Amount of Each Receipt this Period

384.00

Payroll Deduction: \$192.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. KELVIN A BAGGETT

Mailing Address 6453 Tulip Ln

City	State	Zip Code
Dallas	TX	75230-4148

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SVP, CHIEF MEDICAL OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AD6E89E81E09F4695B0B

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MANUEL LINARESMailing Address 7935 East Dr
Apt 901

City	State	Zip Code
North Bay Village	FL	33141-3693

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTH SHORE MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A2C41D10DD1B24CD0988

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

538.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. TERESA L HUSKEY

Mailing Address 4333 Pershing Ave

City	State	Zip Code
Ft Worth	TX	76107-4243

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AA617FFB55E304F36A7F

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. RICHARD B LEE

Mailing Address 925 Penshore Ter

City	State	Zip Code
Glendale	CA	91207-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, PROPERTY TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A47A004651C5A4D7EA5B

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. SALLY A HURT-STEFFEN

Mailing Address 712 Waltham Ct

City	State	Zip Code
El Paso	TX	79922-2128

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE HOSPITAL

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A5B5F605FC85E4320B0B

Amount of Each Receipt this Period

100.00

Payroll Deduction: \$50.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

312.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MARVIS E. PRICE

Mailing Address 421 Sunrise Way

City

Juno Beach

State

FL

Zip Code

33408-2044

FEC ID number of contributing
federal political committee.

C

Name of Employer

PALM BEACH GARDENS MEDICAL CENTER

Occupation

Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AA5C470382ACA410FB07

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. CEZAR L QUIAMBAO

Mailing Address 845 Brisa Del Mar Dr

City

El Paso

State

TX

Zip Code

79912-1513

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROVIDENCE MEMORIAL HOSPITAL

Occupation

DIR, RESPIRATORY SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AAF1B51A5A7EC4872924

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. ERIC M DELGADO

Mailing Address 4734 Briercree Ave

City

Lakewood

State

CA

Zip Code

90713-2312

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, REGIONAL FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A1300E1944EC14B06AE2

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

78.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 77

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JASON E EVANS

Mailing Address 676 Bryn Mahr Ln

City	State	Zip Code
Rockwall	TX	75087-6018

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
LAKE POINTE MEDICAL CENTER	CEO

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AC8EE0B9C9C494173930

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JOHN QUINN

Mailing Address 1138 Pine Valley Rd

City	State	Zip Code
Griffin	GA	30224-4953

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
SPALDING REGIONAL HOSPITAL	CEO

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A793D071B616441DBA8D

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. BARRY LEFFLER

Mailing Address 4123 WYCLIFF AVE

City	State	Zip Code
Dallas	TX	75219-3005

FEC ID number of contributing federal political committee.

C

Name of Employer	Occupation
TENET HEALTHCARE CORPORATION	VP, Marketing and Business Development

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A33D25B334E9846A4A42

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

192.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JEREMY CLARK

Mailing Address 2411 N Hall St
 Apt 19

City State Zip Code
 Dallas TX 75204-2839

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 TENET HEALTHCARE CORPORATION

Occupation
 VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A948B762E0162434699D

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$40.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ROBERT B SHAPPLEY

Mailing Address 1043 Humphrey Oaks Cir

City State Zip Code
 Memphis TN 38120-2626

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 SAINT FRANCIS HOSPITAL

Occupation
 ASSOC. ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A60D2A5000D3841F8BC5

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. JIMMY K. DUNCAN

Mailing Address 1001 Garden View Dr. NE
 Apt 1224

City State Zip Code
 Atlanta GA 30319-5824

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 ATLANTA MEDICAL CENTER

Occupation
 CHRO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A222E768112794990940

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

156.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LINDA K MERCIER

Mailing Address 14 Columbia Crest Pl

City
SpringState
TXZip Code
77382-1334FEC ID number of contributing
federal political committee.

C

Name of Employer

HOUSTON NW MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AB8D36FDC791A44759E2

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JEFFREY K. STADNIK

Mailing Address 1643 Rainbow Knls

City

Chino Hills

State

CA

Zip Code

91709-4866

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET CALIFORNIA, SANTA ANA OFFICE

Occupation

SPEC-PRODUCTIVITY PMI SR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AF12322E1E1A14A1BA13

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$15.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. HOAI-SON L NGUYEN

Mailing Address 303 Prince Albert Ct

City

Richardson

State

TX

Zip Code

75081-5059

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, IS HR/PR & RPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AFFA9E02610B041BEB71

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MICHAEL HALTER

Mailing Address 111 Righters Mill Rd

City

Penn Valley

State

PA

Zip Code

19072-1312

FEC ID number of contributing
federal political committee.

C

Name of Employer

HAHNEMANN UNIVERSITY HOSPITAL

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : A9178F37A806A48B3AD3

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. TIM ADAMS

Mailing Address 2408 University Club Dr

City

Austin

State

TX

Zip Code

78732-2052

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SVP REGIONAL OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : AED894749BD9A4564BAB

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. RICKY JOHNSTON

Mailing Address 401 N Church St

City

McKinney

State

TX

Zip Code

75069-3854

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, IT TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : AEC5D1F824A304ACF933

Amount of Each Receipt this Period

90.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

320.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SAMUEL ROTH

Mailing Address 4365 Greenleaf Ct

City

Concord

State

CA

Zip Code

94518-1941

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIRECTOR GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A45358811EFDC479294A

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JOE D THOMASON

Mailing Address 6304 Carmel Falls Ct

City

McKinney

State

TX

Zip Code

75070-8768

FEC ID number of contributing
federal political committee.

C

Name of Employer

CENTENNIAL MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A42093A93C80B4C84B95

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MARK H BRYAN

Mailing Address 7480 Kings Mountain Rd

City

Vestavia

State

AL

Zip Code

35242-2581

FEC ID number of contributing
federal political committee.

C

Name of Employer

DELRAY MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AF3CB1D52003D4308BB4

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

134.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. GLORIA M LOERA

Mailing Address 3061 Snowy Point Dr

City

El Paso

State

TX

Zip Code

79938-5401

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE HOSPITAL

Occupation

DIR, NURSING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A9713B43064A5481AB74

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ROBERTA STEWART

Mailing Address 27291 Calle De La Rosa

City

San Juan Capo

State

CA

Zip Code

92675-1873

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, BUSINESS DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A3AA13336AFDF462EA82

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MICHAEL K BURTNETT

Mailing Address 1131 N Edgefield Ave

City

Dallas

State

TX

Zip Code

75208-3624

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, OUTPATIENT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AA2262CC4686145E395B

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

116.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JULIE K DIPPEL

Mailing Address 3706 Ash Glen Dr

City
SpringState
TXZip Code
77388-4154FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, ORG LEARNING & DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A4D783C475E074466975

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. MICHAEL S HONGOLA

Mailing Address 6704 Westmont Dr

City
ColleyvilleState
TXZip Code
76034-7263FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, INFO SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A9027A4C3142B4758B2F

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$20.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. WILLIAM T MOORE

Mailing Address 3014 Castle Pines Dr

City
DuluthState
GAZip Code
30097-2039FEC ID number of contributing
federal political committee.

C

Name of Employer

ATLANTA MEDICAL CENTER

Occupation

MARKET CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A4228A1B226FE4CBCA34

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. WAYNE E COBB

Mailing Address 4001 Orchid Ln

City

Mansfield

State

TX

Zip Code

76063-5577

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, TAX

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A703013BFC02843649C5

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ALLEN C POSTON

Mailing Address 7055 Orchard Vw

City

Edmond

State

OK

Zip Code

73025-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, REG PHYS DEVELOPMNT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AD490F9B1A60D4CE89FE

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. TYLER MURPHY

Mailing Address 108 Londonberry Ter

City

Southlake

State

TX

Zip Code

76092-7321

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP AND TREASURER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A767E03195C7D43E4B1F

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

78.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. COREY L DAVISON

Mailing Address 2700 Crepe Myrtle Dr

City	State	Zip Code
Flower Mound	TX	75028-3617

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, GOVT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A033D6074FDE346C7827

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. DAWN CASTRO

Mailing Address 15408 Fox Meadow Ln

City	State	Zip Code
Frisco	TX	75035-3671

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONIFER

Occupation

VP CLIENT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AFE4D0EF8E4DF410590D

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. DAVID SASSANO

Mailing Address 10847 LOCHSPRING DRIVE

City	State	Zip Code
Dallas	TX	75218-1201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tenet Healthcare Corp

Occupation

Director, Physician Business Developem

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A5A797686B6E24689A04

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

154.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LYNNE SCROGGINS
 Mailing Address 3777 Peachtree Rd NE
 Apt 632

City	State	Zip Code
Atlanta	GA	30319-5209

FEC ID number of contributing federal political committee.

C

Name of Employer

ATLANTA MEDICAL CENTER

Occupation

ASSOCIATE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : ADA6B77F656EE4C688DD

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ALVIN W JOSEPHS

Mailing Address 3717 Herwol Ave

City	State	Zip Code
Waco	TX	76710-7218

FEC ID number of contributing federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, COMPLNCE POLICY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A92046D7720364113AD4

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. ERIK G. WEXLER

Mailing Address 110 STUART ST, UNIT 25E

City	State	Zip Code
Boston	MA	02116-5675

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare Corp

Occupation

CEO, Northeast Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AE30103A7AAB54CB8ABA

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶

176.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 31 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. TIMOTHY RAPER

Mailing Address 2333 Salisbury Ct

City

Lewisville

State

TX

Zip Code

75056-5644

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, AVIATION

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AEA2EEABA3A724F2E9C4

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. CHARLES R HARBISON JR.

Mailing Address 4009 Inspiration Cir

City

Carrollton

State

TX

Zip Code

75010-6418

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, FINANCE A&D

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A3FC41B1B86A440D19D5

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. CORDELIA BARBERA

Mailing Address 1200 Cheyenne Dr

City

Desoto

State

TX

Zip Code

75115-7778

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, APPLIED CLIN INFO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A22AEDD74CFA746B7914

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 77

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. WESLEY CHICK

 Mailing Address 1445 Ross Ave
 #1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

AVP, Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A807A5A77D00A4A6E988

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. THALIA C. MARTIN

 Mailing Address 1445 Ross Avenue
 Suite 1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE
HOSPITAL

Occupation

Market Dir., Quality and Patient Safet

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A7DF58B50774C46D1A56

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. EDWIN BODE

Mailing Address 9597 Gotten Way

City	State	Zip Code
Germantown	TN	38139-5657

FEC ID number of contributing federal political committee.

C

Name of Employer

SAINT FRANCIS HOSPITAL

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2015			

Transaction ID : A760ECA606140410BA6A

Amount of Each Receipt this Period

10.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

126.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MICHELE SZKOLNICKI

Mailing Address 308 Foulke Lane

City

Springfield

State

PA

Zip Code

19064-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Director, Market Outpatient Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A9C7E980A04C0409BA44

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ROB FINNEGAN

Mailing Address 2804 Carriage Trl

City

McKinney

State

TX

Zip Code

75070-4306

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, FINANCE ASC

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AC0F1DC68A8634BFF9AA

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MICHAEL J KING

Mailing Address 2713 Stuyvesant Cir

City

Modesto

State

CA

Zip Code

95356-0337

FEC ID number of contributing
federal political committee.

C

Name of Employer

DOCTORS MEDICAL CENTER-MODESTO

Occupation

COO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A75E49454C7684FE5834

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MICHAEL MALONEYMailing Address 1445 Ross Avenue
Suite 1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, Acquisition and Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11				28			2015					

Transaction ID : A756840BDADE8439E874

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. PAUL SMITH

Mailing Address 24 Willow Oak Ln

City	State	Zip Code
Saint Louis	MO	63122-4714

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, OUTPT STRATG DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11				28			2015					

Transaction ID : A36BCDCA2166D4052AD6

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. RODNEY A REASONER

Mailing Address 1960 Mary Lee Ln

City	State	Zip Code
Allen	TX	75002-8528

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11				28			2015					

Transaction ID : A603ED5523902431EBE3

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

134.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JEFFREY KOURY

Mailing Address 42 Barneburg

City State Zip Code
Dove Canyon CA 92679-4210

FEC ID number of contributing federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SVP, REGIONAL OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : AC60E721CEB3F4BCA9A5

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. CRAIG C ARMIN

Mailing Address 23510 Berdon St

City State Zip Code
Woodland Hills CA 91367-3004

FEC ID number of contributing federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, GOVT PROGRAMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A03F351A4E8404716A18

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$40.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. HAROLD K. BANDY

Mailing Address 9004 OLD SMRYNA RD

City State Zip Code
Brentwood TN 37027-6058

FEC ID number of contributing federal political committee.

C

Name of Employer

Tenet Healthcare Corp

Occupation

Senior Director, IS Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1968.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A42A572D8FC3141BAB0E

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

348.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MOISES PADILLA

Mailing Address 450 NE 5th St
Unit 251

City State Zip Code
Ft Lauderdale FL 33301-3461

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET PATIENT FINCL SVCS

Occupation

DIR, PA MARKET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A24F5F981F0754768A39

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. CAROL HAN

Mailing Address 4417 Knollview Dr

City State Zip Code
Plano TX 75024-4303

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, MANAGED CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A7F2AAA8FF0B34617AC2

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. KEN E JORDAN

Mailing Address 67 Sutton Pl E

City State Zip Code
Palm Desert CA 92211-9046

FEC ID number of contributing
federal political committee.

C

Name of Employer

DESERT REGIONAL MEDICAL CENTER

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 28 / 2015

Transaction ID : A6D131B6187E8441F8C3

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. EDLECIA SHERROD

Mailing Address 1955 MARKET CTR BD #2418

City	State	Zip Code
Dallas	TX	75207-3480

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Manger, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AE434FDC43726485E888

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. SAMUEL G HARRIS

Mailing Address 933 Havenhurst Dr

City	State	Zip Code
West Hollywood	CA	90046-6919

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, REG REIMBURSEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A016A573547804CB0BC1

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. VANESSA BENAVIDESMailing Address 3818 Cedar Spr
101-32

City	State	Zip Code
Dallas	TX	75219-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

CORP COMPLIANCE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

897.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2015

Transaction ID : A26F96A8E026246A5919

Amount of Each Receipt this Period

39.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶

97.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALBERT BARROCAS

Mailing Address 4050 Spalding Dr

City	State	Zip Code
Atlanta	GA	30350-1100

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTH FULTON MEDICAL CENTEROccupation
CHIEF MEDICAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AA8EE476FF9574B0ABC9

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. GREGORY P. NAGENGASTMailing Address 1445 Ross Avenue
Suite 1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONIFEROccupation
Senior Director, Regional Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AC81827CD5C8C4C409DB

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MARY E. CLEARY

Mailing Address 940 Bonnie Brae Place,

City	State	Zip Code
River Forest	IL	60305-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENET HEALTHCARE CORPORATIONOccupation
CFO Chicago Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A1F898134B5C343F5B64

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

136.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JASON P ALEXANDER

Mailing Address 7220 Wynnridge Dr

City

State

Zip Code

Mobile

AL

36695-5500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

EAST COOPER REGIONAL MEDICAL CENTE

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A07DC1109A7AB42B5AE2

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. PAUL A CASTANON

Mailing Address 6307 Preston Pkwy

City

State

Zip Code

Dallas

TX

75205-1650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

TENET HEALTHCARE CORPORATION

VP & DEPUTY GNRL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AB8FF1DA6AB8241A0834

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MARCUS CANO

Mailing Address 7008 GRANERO DR

City

State

Zip Code

El Paso

TX

79912-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SIERRA PROVIDENCE EASTSIDE HOSPITAL

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A9DF3FE1B2BBD499AAF4

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

96.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRIAN L. SEHER

Mailing Address 1445 Ross Avenue
Suite 1400

City State Zip Code
Dallas TX 75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Market CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A805DB5F429EC4881B8F

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. TERRY WHEELER

Mailing Address 13802 Magnolia Manor Dr

City State Zip Code
Cypress TX 77429-8162

FEC ID number of contributing
federal political committee.

C

Name of Employer

CYPRESS FAIRBANKS MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A5039035838AE49DDA24

Amount of Each Receipt this Period

70.00

Payroll Deduction: \$35.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. WILLIAM M LOWES

Mailing Address 428 Tribal Woods Rd

City State Zip Code
Collierville TN 38017-3404

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAINT FRANCIS HOSPITAL-BARTLETT

Occupation

DBD-ASSOC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A093FC4EE1AC447D889E

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. KIMBERLY P BROWN

Mailing Address 2634 Forest Pebble

City

San Antonio

State

TX

Zip Code

78232-4141

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A8C86262B7B1F44BA950

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ENRIQUE MARTINEZ

Mailing Address 1445 Ross Avenue
Suite 1400

City

Dallas

State

TX

Zip Code

75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROVIDENCE MEMORIAL HOSPITAL

Occupation

CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A2C69B45BB08E4F89BB8

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MARGARET PERREIRA

Mailing Address 2972 Harrow Rd

City

Spring Hill

State

FL

Zip Code

34608-4429

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR SPEC, CLINICAL PMI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AD6B75AFADD6E48D48D4

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LORI HOLMAN

Mailing Address 7213 ELLIS ROAD

City

Fort Worth

State

TX

Zip Code

76112-4301

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Manager, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A3B7BDB3D7F7C470085E

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JUDITH STIMSON-RUSIN

Mailing Address 11807 Littlestone Ct

City

West Palm Beach

State

FL

Zip Code

33412-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer

PALM BEACH GARDENS MEDICAL CENTER

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A189B28733E43488DBD8

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. JOHN A GRAH

Mailing Address 6104 La Posta Dr

City

El Paso

State

TX

Zip Code

79912-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROVIDENCE MEMORIAL HOSPITAL

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AA9CE2348E0CD4CE089C

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

136.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MARK R. MONTONEY

Mailing Address 1234 Potter Lane

City	State	Zip Code
Gallatin	TN	37066-7499

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tenet Healthcare Corporation

Occupation

CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2019.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : A32D9AB07C87841FB8DD

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. KAREN R FOWLER

Mailing Address 8306 Turquoise St

City	State	Zip Code
El Paso	TX	79904-2513

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROVIDENCE MEMORIAL HOSPITAL

Occupation

ASST VP NURSING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : AF56BF3E041D34815957

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. GEORGE PIETRI

Mailing Address 2908 Lighthouse Dr

City	State	Zip Code
Denton	TX	76210-0094

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, REIMBURSEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : A73854F7B42964591976

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRADLEY S TALBERT

Mailing Address 16 Paddocks Blvd

City

Hilton Head

State

SC

Zip Code

29926-3507

FEC ID number of contributing
federal political committee.

C

Name of Employer

HILTON HEAD HOSPITAL

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : A23547E74244D47D2B1B

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. SUZANNE R. WHITEMailing Address 1445 Ross Avenue
Suite 1400

City

Dallas

State

TX

Zip Code

75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Regional Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : AA92205D22B0D4A0A918

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. CATHRYN H FRASER

Mailing Address 272 Enclaves Ct

City

Coppell

State

TX

Zip Code

75019-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SVP, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : AF8BB647E41EB4E65804

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

232.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JACK HARARI

Mailing Address 501 Lido Dr

City	State	Zip Code
Fort Lauderdale	FL	33301-2537

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEST BOCA MEDICAL CENTEROccupation
CHIEF MEDICAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A8AAC909C26DA47CE8D4

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. DAVID L ARCHER

Mailing Address 2594 Hocksett Cv

City	State	Zip Code
Germantown	TN	38139-6655

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAINT FRANCIS HOSPITALOccupation
MARKET CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A65B30130CA004C69B7F

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MICHELE M FINNEY

Mailing Address 21521 Turtledove St

City	State	Zip Code
Trabuco Canyon	CA	92679-3486

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOS ALAMITOS MEDICAL CENTEROccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A736E002F20A14B958E5

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

288.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MR COLLIN O LEMAISTRE

Mailing Address 288 Boulder Ln

City

Nacogdoches

State

TX

Zip Code

75965-7006

FEC ID number of contributing
federal political committee.

C

Name of Employer

NACOGDOCHES MEDICAL CENTER

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : A7C310AB2458146EB8B6

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. RICHARD BECK

Mailing Address 107 Waterman

City

Irvine

State

CA

Zip Code

92602-1654

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, C&D - WESTERN DIV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : A4CBB4C41BE1D43118E6

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. JANIE PATTERSON

Mailing Address 1403 Crockett Dr

City

Frisco

State

TX

Zip Code

75033-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET PATIENT FINCL SVCS

Occupation

SVP, REVENUE CYCLE MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : A92DD9E5655AD4C60B1F

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

136.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CONLEY S CERVANTES

Mailing Address 819 Cambridge Manor Ln

City	State	Zip Code
Coppell	TX	75019-6105

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, MANAGED CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A17AAFBB41BAF48A0914

Amount of Each Receipt this Period

24.00

Payroll Deduction: \$12.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. SUELLEN SMITH

Mailing Address 84 Tierra Vista Rd

City	State	Zip Code
Paso Robles	CA	93446-9702

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, PMI TEAM LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : ABDD8F0EE9B764889BA2

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. JASON D. PINKALL

Mailing Address 6526 Anita St.,

City	State	Zip Code
Dallas	TX	75214-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A31D3B798048444F680E

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

122.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MARK P LISA

Mailing Address 391 E Milgeo Ave

City	State	Zip Code
Ripon	CA	95366-2120

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOCTORS HOSPITAL OF MANTECAOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A01E8C50212A04A578FE

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. KEITH STANHILL

Mailing Address 10423 REDMOND DRIVE

City	State	Zip Code
Cordova	TN	38016-5436

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Francis-EquicareOccupation
CHIEF HR OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A3B5AAB541A0F451EA4E

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. KEVIN J. CARACCIOLO

Mailing Address 3360 Burns Rd.

City	State	Zip Code
Palm Beach Gardens	FL	33410-4323

FEC ID number of contributing
federal political committee.

C

Name of Employer
PALM BEACH GARDENS MEDICAL CENTEROccupation
CHIEF HR OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A797ECB2FBA58429A981

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

136.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANDREAS M GRAF

Mailing Address 3975 Stockton Ln

City State Zip Code
 Dallas TX 75287-4921

FEC ID number of contributing federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, TRAVEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A8641F9D14E40491099E

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. LISA A. SMITH

Mailing Address 25418 Twister Trail

City State Zip Code
 Spring TX 77373-7657

FEC ID number of contributing federal political committee.

C

Name of Employer

CONIFER

Occupation

Director MECS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AA65A007A7A384D408F3

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. BRITT REYNOLDS

Mailing Address 3201 Wentwood Dr

City State Zip Code
 Dallas TX 75225-4845

FEC ID number of contributing federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

PRESIDENT OF HOSPITAL OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A77E6942ECA4542E8AE9

Amount of Each Receipt this Period

192.30

Payroll Deduction: \$96.15/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

268.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SANDRA C HOLMAN

Mailing Address 3874 Heatherbrook Trl

City	State	Zip Code
Vale	NC	28168-9570

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRYE REGIONAL MEDICAL CENTER

Occupation

DIR, RADIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AF1D371E74A524DF5B32

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JOSEPH A DESANTISMailing Address 201 W Lancaster Ave
Unit 413

City	State	Zip Code
Ft Worth	TX	76102-6669

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, EXECUTIVE OFFICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AC43FCF5F4B6A4DD6ACF

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MARK F. ROBERTS

Mailing Address 13047 W. Estero Lane

City	State	Zip Code
Litchfield Park	AZ	85340-5576

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

PMI Senior Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A97BC1F8497CD4ED48C2

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

118.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. GARRY L GAUSE

Mailing Address 1150 Lake Colony Ln

City

Vestavia

State

AL

Zip Code

35242-7423

FEC ID number of contributing
federal political committee.

C

Name of Employer

BROOKWOOD MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1	/	2	8		/	2	0	1	5		

Transaction ID : A4FFEFB3E692441E1A00

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. MARITA COVARRUBIAS

Mailing Address 7115 Wildgrove Ave

City

Dallas

State

TX

Zip Code

75214-3841

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP & ASST GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1	/	2	8		/	2	0	1	5		

Transaction ID : A45CC8AB294084CE7856

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. KENT G CLAYTON

Mailing Address 3 Turtle Bay Dr

City

Newport Beach

State

CA

Zip Code

92660-4266

FEC ID number of contributing
federal political committee.

C

Name of Employer

PLACENTIA LINDA HOSPITAL

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1	/	2	8		/	2	0	1	5		

Transaction ID : A5315B3885DF24124A7E

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 52 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JANIS THAYER

Mailing Address 1735 Crimson Ter

City	State	Zip Code
Brentwood	CA	94513-2618

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, LABOR RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A0683E6E55016445FBFE

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. PAMELA DAVIS

Mailing Address 5909 LUTHER AVE #2304

City	State	Zip Code
Dallas	TX	75225-5914

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONIFER

Occupation

Senior Director, Government Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A75C8B69249D14D7F948

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. DAVID W BORDOFSKE

Mailing Address 5001 Ashland Belle Ln

City	State	Zip Code
Frisco	TX	75035-7682

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, CLINICAL SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A15C4E052EDAD449AB05

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

292.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRUCE MEARS

Mailing Address 10312 Arvin Hill Rd

City State Zip Code
 Aubrey TX 76227-6847

FEC ID number of contributing federal political committee.

C

Name of Employer
 TENET HEALTHCARE CORPORATION

Occupation
 SR DIR, IS OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AFB438F516E014030916

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. DOUGLAS E RABE

Mailing Address 7746 Eagle Trl

City State Zip Code
 Dallas TX 75238-4115

FEC ID number of contributing federal political committee.

C

Name of Employer
 TENET HEALTHCARE CORPORATION

Occupation
 VP, TAXATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AD427D28100914EF78E0

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. CONRAD MALLET

Mailing Address 19386 Cumberland Way

City State Zip Code
 Detroit MI 48203-1456

FEC ID number of contributing federal political committee.

C

Name of Employer
 Detroit Medical Center

Occupation
 Chief Administrative Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.28

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A1EF5884FDC7B43FA927

Amount of Each Receipt this Period

76.94

Payroll Deduction: \$38.47/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

174.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALAN R CASONMailing Address 255 Evernia St
Apt 1503

City	State	Zip Code
West Palm Bch	FL	33401-5691

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pinnacle M.S.O

Occupation

VP & CEO MIDTOWN IMAGING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A538FE0424DD94C83B41

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. VICTOR S. JORDAN

Mailing Address 314 VAILWOOD CT

City	State	Zip Code
Bloomfield Hills	MI	48302-1573

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tenet Healthcare Corporation

Occupation

CFO- Northeast Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AC80594FD9A374A8A909

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. DANIEL JACKSON

Mailing Address 11041 Heathland Dr

City	State	Zip Code
Oakton	VA	22124-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE HOSPITAL

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A667C322D43B14662BB2

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

154.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JEFFREY PATTERSON

Mailing Address 3806 Harlan Dr

City

Sachse

State

TX

Zip Code

75048-1912

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SR DIR, BUSINESS DEV

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AFF711C01613D418CA12

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. RUBEN O RODRIGUEZ

Mailing Address 6905 Villa Hermosa Dr

City

El Paso

State

TX

Zip Code

79912-2341

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE
HOSPITAL

Occupation

DIR, PLANT OPERATIONS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

936.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A9BF4EF03636E4A2B805

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. JOHN W. TURNER Jr.

Mailing Address 1445 Ross Ave, Suite 1400

City

Dallas

State

TX

Zip Code

75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tenet Healthcare Corp

Occupation

Senior Director, Practice Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

936.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A54D4226ADF1242AE965

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

194.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SANDRA HILL

Mailing Address 2008 Haversham Dr

City

Flower Mound

State

TX

Zip Code

75022-8440

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, DOC & TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : ADD9A76B69DE04023A63

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. WEBB COCHRAN

Mailing Address 3961 St Claire Ct

City

Atlanta

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, GOVT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : A1C31194C98144670BE8

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MICHAEL N. LANE

Mailing Address 5125 Ocean Bluff Ct

City

Seaside

State

CA

Zip Code

93955-6526

FEC ID number of contributing
federal political committee.

C

Name of Employer

TWIN CITIES COMMUNITY HOSPITAL

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				28				2015					

Transaction ID : AC5A86B1003484D679F5

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BARBARA EUSEBIO

Mailing Address 82-814 Pembroke Lane

City	State	Zip Code
Indio	CA	92201-9692

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tenet Healthcare Corp

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A90EBA6E507F547F8BC9

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. CYNTHIA Z BECKMAN

Mailing Address 1811 N Park Towne Pl

City	State	Zip Code
Philadelphia	PA	19130

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

MGR, LITIGATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AE842AF50419C4BE8AC8

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. TARA C. JONES

Mailing Address 5959 Park Ave.

City	State	Zip Code
Memphis	TN	38119-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A30D376BDA19A4571B43

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

96.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 58 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. KARIMA BENTOUNSI

Mailing Address 1445 Ross Avenue
Suite 1400

City State Zip Code
Dallas TX 75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weiss Memorial Hospital

Occupation
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A526F283CD70343D6A90

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. SHARON OXENDALE

Mailing Address 5627 S THURLOW ST

City State Zip Code
Hinsdale IL 60521-5154

FEC ID number of contributing
federal political committee.

C

Name of Employer
MacNeal Hospital

Occupation
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AD5FBFEDF4AE441CBBE4

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. ANDREI SORAN

Mailing Address 28 Lothrop Street

City State Zip Code
Newtonville MA 02460-1420

FEC ID number of contributing
federal political committee.

C

Name of Employer
Detroit Medical Center

Occupation
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

11 / 28 / 2015

Transaction ID : AF63DE3774E8049F5B5E

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRANDON MAY

Mailing Address 3824 TIERRA CHISUM DR

City	State	Zip Code
El Paso	TX	79938-5358

FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE HOSPITAL

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A1C290CE642694E0F99D

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. STEPHEN M MOONEY

Mailing Address 4619 Briar Oaks Cir

City	State	Zip Code
Dallas	TX	75287-7503

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONIFER

Occupation

PRESIDENT, CONIFER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : ACA6807961FCB4A30848

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. AMANDA C. DYLEMailing Address 1445 Ross Avenue
Suite 1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

COASTAL CAROLINA MEDICAL CENTER

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A903468BDCACF4B4C94B

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

118.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. WILLIAM L. LANTZY

Mailing Address 1445 Ross Avenue
Suite 1400

City State Zip Code
Dallas TX 75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
DMC Huron Valley Sinai Hospital

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A48035BCF029C46B2A93

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. RUDOLPH F. MALEK

Mailing Address 1445 Ross Avenue
Suite 1400

City State Zip Code
Dallas TX 75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
NACOGDOCHES MEDICAL CENTER

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A1A4598554F6B4863A31

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. GLORIA J WALKER-LARKINS

Mailing Address 1445 Ross Avenue
Suite 1400

City State Zip Code
Dallas TX 75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Detroit Medical Center

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A735624DD61EF4844824

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. NANCY LUTTRULL-KITT

Mailing Address 9530 Deodar St

City	State	Zip Code
Rancho Cucamonga	CA	91737-3547

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET PATIENT FINCL SVCS

Occupation

DIR, REV CYCLE MGMT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : ADA3FBCB72D61493FA8E

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. DANIEL WALDMANN

Mailing Address 1111 N Montclair Ave

City	State	Zip Code
Dallas	TX	75208-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AC94B966BBA4845CEAA5

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. PATRICIA J. HOSKIN

Mailing Address 3336 South Channel Drive

City	State	Zip Code
Harsens Island	MI	48028-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Detroit Medical Center

Occupation

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A94E30BFD4E1141E4B8E

Amount of Each Receipt this Period

19.24

Payroll Deduction: \$9.62/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

231.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 77
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ASHLEY M. VONNIDAMailing Address 1445 Ross Avenue
Suite 1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

COASTAL CAROLINA MEDICAL CENTER

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A5FF6B78ECB8C4D959EF

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. KATHLEEN TREGEARMailing Address 1445 Ross Ave
#1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mission Trail Baptist Health System

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A88F39F0844614A768EF

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. DEBORAH J. LEBLANCMailing Address 1445 Ross Avenue
Suite 1400

City	State	Zip Code
Dallas	TX	75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sinai Grace Hospital

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : AD157505104C442569D5

Amount of Each Receipt this Period

19.26

Payroll Deduction: \$9.63/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

117.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 63 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LERRYN CROCKER

Mailing Address 2386 Liledoun Rd

City

Taylorsville

State

NC

Zip Code

28681-8892

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

FRYE REGIONAL MEDICAL CENTER

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : AA61EC8C30BE44561B5A

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ALTA A. GORDON

Mailing Address 30014 GARDENIA LN

City

Southfield

State

MI

Zip Code

48076-2091

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Detroit Medical Center

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.81

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	4			2	0	1	5		

Transaction ID : ABB6545A8428940DDAC5

Amount of Each Receipt this Period

115.41

Payroll Deduction: \$38.47/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. SHELLEY GILES

Mailing Address 3803 Stockton Ln

City

Dallas

State

TX

Zip Code

75287-4919

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, RELOCATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	5		

Transaction ID : AD10C1AD28E764905AEA

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

347.41

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. DANIEL M KARNUTA

Mailing Address 981 Patrician Ct

City	State	Zip Code
McKinney	TX	75069-8781

FEC ID number of contributing federal political committee.

C

Name of Employer

CONIFER

Occupation

SVP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : ADF33586E62A84215A9C

Amount of Each Receipt this Period

70.00

Payroll Deduction: \$35.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. RICHARD E GLANCEY

Mailing Address 6516 Vasco Way

City	State	Zip Code
El Paso	TX	79912-1709

FEC ID number of contributing federal political committee.

C

Name of Employer

SIERRA MEDICAL CENTER

Occupation

DIR, EXTERNAL AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AF559463C223947EA8AF

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. NORMA A ZERINGUE

Mailing Address 5757 Southwestern Blvd

City	State	Zip Code
Dallas	TX	75209-3437

FEC ID number of contributing federal political committee.

C

Name of Employer

CONIFER

Occupation

SVP, STRATEGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A60FEA6960245482CA6C

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

186.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. DINA L DUNN

Mailing Address 3717 Cherry Ridge Dr

City
FriscoState
TXZip Code
75033-1328FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, HR HOSPITAL OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AFD6222ECBAA545C08F2

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. JULIE R. EBERTINGMailing Address 3700 HUECO VALLEY
#1902City
El PasoState
TXZip Code
79938-5427FEC ID number of contributing
federal political committee.

C

Name of Employer

SIERRA PROVIDENCE EASTSIDE
HOSPITAL

Occupation

Director of Imaging Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A35E1A132A6C04C2B86B

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. KELLY SCHIRMERMailing Address 1500 Locust St
Apt 3911City
PhiladelphiaState
PAZip Code
19102-4326FEC ID number of contributing
federal political committee.

C

Name of Employer

ST. CHRISTOPHER'S HOSPITAL FOR CHILD

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A2E506640C2D641278D4

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. GARY J SLOAN

Mailing Address 615 Stevens Ct

City	State	Zip Code
Danville	CA	94506-4805

FEC ID number of contributing federal political committee.

C

 Name of Employer
 San Ramon Regional Medical Center

 Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A435912F4411D430B941

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. PATRICIA DURAN

Mailing Address 8017 Bowen Rd

City	State	Zip Code
El Paso	TX	79915-4701

FEC ID number of contributing federal political committee.

C

 Name of Employer
 SIERRA PROVIDENCE EASTSIDE HOSPITAL

 Occupation
 CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AB0C13B494E104CC9866

Amount of Each Receipt this Period

10.00

Payroll Deduction: \$5.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. DEBORAH DALEY

Mailing Address PO Box 757

City	State	Zip Code
Edgewood	TX	75117-0757

FEC ID number of contributing federal political committee.

C

 Name of Employer
 TENET HEALTHCARE CORPORATION

 Occupation
 ASST - ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A72D7468B1FEF4DAAAD4

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

88.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRANK L. MOLINARO

 Mailing Address 1445 Ross Avenue
 Suite 1400

 City State Zip Code
 Dallas TX 75202-2703

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Arrowhead Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AC8E559756BF94EA1BCC

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. TIMOTHY PUTHOFF

 Mailing Address 1445 Ross Avenue
 Suite 1400

 City State Zip Code
 Dallas TX 75202-2703

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

HOUSTON NORTHWEST MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AF8CC1CEB26C543FEAE7

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. GARY L HONTS JR.

Mailing Address 7707 N 127th Ave

 City State Zip Code
 Omaha NE 68142-1723

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

JFK Memorial Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AAA19B5AB1E8140DEAA8

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

348.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. IRIS A. TAYLOR

Mailing Address 549 Fiske Drive

City	State	Zip Code
Detroit	MI	48214-2988

FEC ID number of contributing
federal political committee.

C

Name of Employer

Detroit Receiving Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			14			2015					

Transaction ID : AA2FED8FAD34044E2A6E

Amount of Each Receipt this Period

39.00

Payroll Deduction: \$39.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. REGINALD J. EADIE

Mailing Address 6940 KENNESAW

City	State	Zip Code
Canton	MI	48187-1283

FEC ID number of contributing
federal political committee.

C

Name of Employer

Detroit Medical Center

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			28			2015					

Transaction ID : AB86AAB47A8444114BB7

Amount of Each Receipt this Period

38.48

Payroll Deduction: \$19.24/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. PATRICK J. MALONEY

Mailing Address 581 S ARLINGTON AVE

City	State	Zip Code
Elmhurst	IL	60126-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Suburban Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			28			2015					

Transaction ID : AE433BC3BF79F4490924

Amount of Each Receipt this Period

78.00

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOSEPH A. DESCHRYVER

Mailing Address 4990 HACIENDA AVE

City State Zip Code
 San Luis Obispo CA 93401-7971

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SIERRA VISTA REGIONAL MEDICAL CENTER

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A0D2E4223659C467181F

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$10.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. MARK BENZ

Mailing Address 1754 FORGE MOUNTAIN DR

City State Zip Code
 Phoenixville PA 19460-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer
 FRYE REGIONAL MEDICAL CENTER

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A8884AEE699634D57AC7

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. JOSEPH S. STEINER

Mailing Address 11226 POINTE CT

City State Zip Code
 Saint Louis MO 63127-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MacNeal Hospital

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 28 / 2015

Transaction ID : A943D08550058400DA1B

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LARRY M. GOLD

Mailing Address 4348 Karen Lane

City

Bloomfield Hills

State

MI

Zip Code

48302-1961

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Hospital of Michigan

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A2A5B5F984E2A446493C

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. STAN V. HOLMMailing Address 1445 Ross Avenue
Suite 1400

City

Dallas

State

TX

Zip Code

75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Valley Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A75C4720E922747EDA7A

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. DAVID KATZIN

Mailing Address 3080 Canterbury Dr

City

Boca Raton

State

FL

Zip Code

33434

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

REGIONAL CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A35B28F342D89430BA96

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. RICHARD D CARTER

Mailing Address 5166 E Lake Blvd

City

Birmingham

State

AL

Zip Code

35217-3543

FEC ID number of contributing
federal political committee.

C

Name of Employer

BROOKWOOD MEDICAL CENTER

Occupation

CFO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A9C28DA78C1B44955A1F

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. TIMOTHY MENTON

Mailing Address 3700 East South Street

City

Lakewood

State

CA

Zip Code

90712-1419

FEC ID number of contributing
federal political committee.

C

Name of Employer

LAKEWOOD REGIONAL MEDICAL CENTER

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : AAD09CD1D5D0348E4B2E

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. MATTHEW C MICHAELS

Mailing Address 3507 Munstead Trl

City

Frisco

State

TX

Zip Code

75033-1166

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONIFER

Occupation

SVP, HOSPITAL OPS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2015

Transaction ID : A453ADECEBB3B409B959

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶

268.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOSEPH J. MULLANY

Mailing Address 2169 Tottenham Road

City

Bloomfield Hills

State

MI

Zip Code

48301-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Detroit Medical Center

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : AE698DB4978BF47548EA

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. PAULA AUTRYMailing Address 1445 Ross Avenue
Suite 1400

City

Dallas

State

TX

Zip Code

75202-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sinai Grace Hospital

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

231.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A051DB06DB53146B0985

Amount of Each Receipt this Period

19.26

Payroll Deduction: \$9.63/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. KENNETH F SUTHERLAND

Mailing Address 102 Wilmington Ct

City

Southlake

State

TX

Zip Code

76092-8492

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

VP, CONSTRUCTION & DESIG

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

912.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2015			

Transaction ID : A8F79BD00B28F4C76BCA

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

287.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JEREMY D FALKE

Mailing Address 18726 Olive St

City State Zip Code
 Omaha NE 68136-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

DIR, STRTGIC OPS, ANALYS & REPORTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : AF8F946D50DB342D882E

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. GARY K RUFF

Mailing Address 714 Kent Ct

City State Zip Code
 Southlake TX 76092-8868

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

SVP, PHYSICIAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : A26FDFAEFACBE407DB3E

Amount of Each Receipt this Period

192.00

Payroll Deduction: \$96.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. RUSTY MCNEW

Mailing Address 3141 Lovers Lane

City State Zip Code
 Dallas TX 75225-7720

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENET HEALTHCARE CORPORATION

Occupation

Regional CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.57

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : ABAA5848F6C874A32895

Amount of Each Receipt this Period

38.06

Payroll Deduction: \$19.03/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

268.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 77

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOHN E. KNOX

Mailing Address 8327 WINE CUP HILL

City

San Antonio

State

TX

Zip Code

78256-2498

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Luke's Baptist Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			28			2015					

Transaction ID : AFDB44D6D19484A07A34

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. ANTHONY J. TEDESCHI

Mailing Address 115 CHRISTINA CIR

City

Wheaton

State

IL

Zip Code

60189-3115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Weiss Memorial Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			28			2015					

Transaction ID : A24B430AD66D249D7900

Amount of Each Receipt this Period

38.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.00

11172.35

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 77

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends to Elect Christine M. Tartaglione

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2015

Mailing Address PO Box 52153

Transaction ID : B7792D78018A649F48C1

City	State	Zip Code
Philadelphia	PA	19115-7153

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2016 Primary

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Friends of Dave Reed

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2015

Mailing Address P.O. Box 1440

Transaction ID : BEE8EA75778BC4285B2B

City	State	Zip Code
Indiana	PA	15701-5440

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2016 Primary

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Citizens for Vincent Hughes

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2015

Mailing Address 4601 MARKET ST. 1ST FLR

Transaction ID : BD225C45A074D4D58AF7

City	State	Zip Code
Philadelphia	PA	19139-4636

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
2016 Primary

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 77

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends of Lawrence Farnese

Mailing Address PO BOX 22596

City	State	Zip Code
Philadelphia	PA	19110-2596

Purpose of Disbursement
2016 Primary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2015

Transaction ID : BA9D4D1A7501E4816874

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Jake Corman

Mailing Address P.O. Box 421

City	State	Zip Code
Bellefonte	PA	16823-0421

Purpose of Disbursement
2016 Primary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2015

Transaction ID : B11DAA8AAEBF7467A80C

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Committee to Re-Elect Shirley Kitchen

Mailing Address P.O. Box 50606

City	State	Zip Code
Philadelphia	PA	19132-6606

Purpose of Disbursement
2016 Primary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2015

Transaction ID : BA613CDEE23DC48DD96/

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 77

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Hospital & Healthsystem Association of PA PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2015

Mailing Address P.O. Box 2335

City	State	Zip Code
Harrisburg	PA	17105-2335

Transaction ID : B9676E46F9CFC49A5BD7Purpose of Disbursement
2015 Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Other2015

State: District:

Full Name (Last, First, Middle Initial)

B. Sims 4 PA PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2015

Mailing Address 1120 RODMAN ST #2

City	State	Zip Code
Philadelphia	PA	19147-1202

Transaction ID : B2D5078EAC5C94592BDEPurpose of Disbursement
2016 Primary

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

500.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

7000.00
